PART B - FEE(S) TRANSMITTAL

WASHINGTON OFFICE

CUSTOMER NUMBER

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SUGHRUE MION, PLLC

WASHINGTON, DC 20037

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APPLICATION N	APPLICATION NO. FILING DATE		FIRST	FIRST NAMED INVENTOR			ATTORNEY DOCKET NO.			CONFIRMATION NO.	
10/743,539 12/23/2003			Satoru ONO			Q79071			5784		
TITLE OF INVENTIO	N: PRINT CONTR	OLLER, PRIN	T CONTRO	L METHOD,	AND PRIN	NT CONTI	ROL PROGRA	AM			
APPLN, TYPE	SMALL	ISSUE F	EE	PUBLICAT	ION PR	REV. PAID	ISSUE FEE	TOTAL	FEE(S)	DA	TE DUE
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	EXAMINER										
			CLASS-SU	BCLASS							
	Nathan K TYLER			2625							
1. Change of correspon	dence address or ind	ication of "Fee	Address" (3	7 CFR 1.363	2. For pri	nting on th	e patent front	page list	1	Sughrue Mior	n, PLLC
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, 2											
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47, Rev (2) the name of a single firm (having as a											
03-02 or more recent) ATTACHED. Use of a Customer Number is required. member a registered attorney or agent) and the anames of up to 2 registered patent attorneys or agents. If no name is listed, no name will be											
					agents. I	f no name	is listed, no	name will be			
3. ASSIGNEE NAME	AND RESIDENCE	DATA TO BE	PRINTED	ON THE PAT		or type)					.
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4a. The following fee(s	are submitted:			•	, ,		rst reapply a	ny previousiy	paid is	ssue fee show	n above)
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☐ Advance Order - # of Copies ☐ The USPTO is directed and authorized to charge all required fees to Deposit Advance Order - # of Copies ☐ Advance Order - # of Copies ☐ The USPTO is directed and authorized to charge all required fees to Deposit Advance Order - # of Copies							Account No.				
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5. Change in Entity Sta											
a. Applicant claims				• • •		_	U			37 CFR 1.27(g	
The Director of the US	•	*									
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Authorized Signature	_	/Kelly G. Hynd	man 39,234	<u>/</u>	Date			June	25, 200	8	
Typed or Printed Name	:	Kelly G. Hyndr	nan		Registrati	on No.		AWONDAF2	200001	24 194889	10743539
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APPLICATION N	PLICATION NO. FILING DATE FIRST NAME		T NAMED INV	VENTOR	ATTORNEY I	OOCKET NO.	CONFIRMATION NO.						
	10/743,539 12/23/2003			Satoru ONC		079	071	5784					
10/7-3,337		12/2.	3/2003		Salora Orre	,	Ų,		• • • • • • • • • • • • • • • • • • • •				
TITLE OF INVENTIO	N: PRIN	T CONTR	OLLER, PR	INT CONTRO	OL METHOD,	AND PRINT	CONTROL PROGRA	M					
APPLN. TYPE		ALL FITY	ISSUI	E FEE	PUBLICATI FEE	ION PRE	V. PAID ISSUE FEE	TOTAL FEE DUE	(S) DATE DUE				
nonprovisional	N	10	\$144	0.00	\$300.00		\$0.00	\$1,740.00	07/04/2008				
EXAMINER					ART UNI	T CL	ASS-SUBCLASS						
	Nathan K	TYLER			2625								
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Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, 2													
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev (2) the name of a single firm (having as a member a registered attorney or agent) and the 3													
03-02 or more recent) ATTACHED. Use of a Customer Number is required. member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be													
					1	agents. If r	o name is listed, no r	ame will be					
3. ASSIGNEE NAME						ENT (print or							
PLEASE NOTE: Unler recordation as set forth	ss an assi in 37 CF	gnee is ide: R 3.11. Co	ntified below mpletion of t	, no assignee his form is N	data will appe OT a substitute	ar on the pate for filing an	nt. If an assignee is id assignment.	entified below, th	e document has been filed				
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4a. The following fee(s) are subr	nitted:	· · · · · · · · · · · · · · · · · · ·		4b. Paymer	nt of Fee(s): (Please first reapply at	y previously pai	d issue fee shown above)				
☑ Issue Fee					☐ A check	☐ A check is enclosed.							
☑ Publication Fee (No small entity discount permitted)					•	☐ Payment by credit card. Form 1310-2038 is attached.							
☐ Advance Order - # of Copies						☐ The USPTO is directed and authorized to charge all required fees to Deposit Account No. 19-4880. Please also credit any overpayments to said Deposit Account.							
5. Change in Entity Sta													
a. Applicant claims							ger claiming SMALL I						
The Director of the US	PTO is re	quested to a	apply the Issu	e Fee and Pu	blication Fee (i	f any) or to re	apply any previously p	oaid issue fee to th	e application identified abo				
NOTE: The Issue Fee a party in interest as show	and Public wn by the	records of	(if required) the United S	will not be ac tates Patent a	cepted from an nd Trademark (yone other the Office.	n the applicant; a regi	stered attorney or	agent; or the assignee or of				
Authorized Signature			Kelly G. Hy	ndman 39,23	4/	Date		June 25, 2	2008				
Typed or Printed Name	e	1	Kelly G. Hyr	ndman		Registration	No.	39,234					
Modified PTOL-85 (Re	ev. 08/07)	Approved	for use throu	igh 08/31/20	10.		<u> </u>						